#### § 153.200

- (5) The percentage of reinsurance contributions received from HHS for the State to be allocated to the applicable reinsurance entity; and
- (6) An estimate of the amount of reinsurance payments that will be made to issuers with respect to enrollees within those boundaries.
- (e) Reinsurance payment. If a State that establishes a reinsurance program intends to modify the attachment point, reinsurance cap, or coinsurance rate from the corresponding parameters specified in the annual HHS notice of benefit and payment parameters for the applicable benefit year, the State must—
- (1) Describe those modified parameters in the State notice of benefit and payment parameters; and
- (2) Apply the modified parameters uniformly throughout the State.
- (f) Risk adjustment content. A State operating a risk adjustment program must provide the information set forth in §153.330(a) and the data validation standards set forth pursuant to §153.350 in the State notice of benefit and payment parameters.

### Subpart C—State Standards Related to the Reinsurance Program

#### §153.200 [Reserved]

## §153.210 State establishment of a reinsurance program.

- (a) General requirement. Each State is eligible to establish a reinsurance program for the years 2014 through 2016.
- (1) If a State establishes a reinsurance program, the State must enter into a contract with one or more applicable reinsurance entities to carry out the provisions of this subpart.
- (2) If a State contracts with more than one applicable reinsurance entity, the State must:
- (i) Ensure that each applicable reinsurance entity operates in a distinct geographic area with no overlap of jurisdiction with any other applicable reinsurance entity;
- (ii) Use the same payment parameters with respect to each applicable reinsurance entity; and
- (iii) Notify HHS in the manner and timeframe specified by HHS of the per-

- centage of reinsurance contributions received from HHS for the State to be allocated to each applicable reinsurance entity.
- (3) A State may permit an applicable reinsurance entity to subcontract specific administrative functions required under this subpart and subpart E of this part.
- (4) A State must review and approve subcontracting arrangements to ensure efficient and appropriate expenditures of administrative funds collected under this subpart.
- (5) A State must ensure that the applicable reinsurance entity completes all reinsurance-related activities for benefit years 2014 through 2016 and any activities required to be undertaken in subsequent periods.
- (b) Multi-State reinsurance arrangements. Multiple States may contract with a single entity to serve as an applicable reinsurance entity for each State. In such a case, the reinsurance programs for those States must be operated as separate programs.
- (c) Non-electing States. HHS will establish a reinsurance program for each State that does not elect to establish its own reinsurance program.
- (d) Oversight. Each State that establishes a reinsurance program must ensure that the applicable reinsurance entity complies with all provisions of this subpart and subpart E of this part throughout the duration of its contract.

# § 153.220 Collection of reinsurance contribution funds.

- (a) Collections. If a State establishes a reinsurance program, then—
  - (1) The State may elect to-
- (i) Have the applicable reinsurance entity collect contributions for reinsurance contribution enrollees who reside in that State directly from issuers of health plans; or
- (ii) Ensure that the applicable reinsurance entity accepts contributions for reinsurance contribution enrollees who reside in that State with respect to issuers of health plans from HHS.
- (2) The State must ensure that the applicable reinsurance entity accepts contributions for reinsurance contribution enrollees who reside in that State